

FD1000005120

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DIVISION OF CORPORATIONS

WITHDRAWAL OF FOREIGN CORPORATION

KOMATSU SILICON AMERICA, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

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FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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Ps 9/30/05
with

**APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF
AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA**

Komatsu Silicon America, Inc.

(Name of Corporation)

F01000005120

(Document Number of Corporation (if known))

Oregon

(Incorporated Under Laws of)

This corporation is no longer transacting business or conducting affairs within the State of Florida and hereby voluntarily surrenders its authority to transact business or conduct affairs in Florida.

This corporation revokes the authority of its registered agent in Florida to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business or conduct affairs in Florida.

The following is a current mailing address for the corporation:

1915 NW Amberglen Parkway, Suite 200

(Mailing Address)

Beaverton, OR 97006

(City/ State /Zip)

The corporation agrees to notify the Department of State in the future of any change in its mailing address.

Bruce R. McVean

(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

9-13-05

(Date)

Bruce R. McVean

(Typed or printed name of person signing)

Sac. Trans.

(Title of person signing)

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Account Number : 105256001620
Phone : (608) 827-5300
Fax Number : (608) 827-5501

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DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

LEAVE IT TOO ME, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2005 SEP 22 P 2:48

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9/22/2005

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**ARTICLES OF ORGANIZATION
OF
LEAVE IT TOO ME, LLC**

ARTICLE I NAME

The name of the limited liability company shall be: **LEAVE IT TOO ME, LLC**

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 5505 Albin Dr., Green Acres, Florida 33463.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Business Filings Incorporated, 1203 Governors Square Blvd., Suite 101, Tallahassee, Florida 32301-2960. Located in the County of Leon.

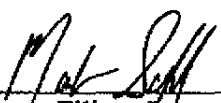
ARTICLE IV DURATION

The duration for the limited liability company shall be: 12/31/2045.

ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Members and the names and addresses of the members of the Limited Liability Company are:

Michael McEwen, 5505 Albin Dr., Green Acres, Florida 33463
Thomas Becker, 140 North West 42nd Way, Deerfield Beach, Florida 33442
John Lacicero, 10687 Old Hammock Way, Wellington, Florida 33414


Business Filings Incorporated, Organizer
Mark Schiff, AVP
Authorized Representative
Prepared by Mark Schiff, Business Filings Incorporated, 8025 Excelsior Dr., Suite 200,
Madison, WI 53717
(608) 827-5300

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CERTIFICATE OF DESIGNATION OF REGISTERED
AGENT/REGISTERED OFFICE

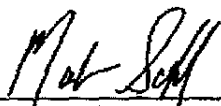
PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES,
THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE
STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN
DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE
STATE OF FLORIDA.

The name of the limited liability company is: **LEAVE IT TOO ME, LLC**

The name and address of the registered agent and office is Business Filings Incorporated,
1203 Governors Square Blvd., Suite 101, Tallahassee, Florida 32301-2960. Located in
the County of Leon.

Having been named as registered agent and to accept service of process for the above
stated company at the place designated in this certificate, I hereby accept the appointment
as registered agent and agree to act in this capacity. I further agree to comply with the
provisions of all statutes relating to the proper and complete performance of my duties,
and I am familiar with and accept the obligations of my position as registered agent.

Signature: _____


Mark Schiff, AVP
Business Filings Incorporated

Date: September 22, 2005

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TALLAHASSEE, FLORIDA

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